2012. Apheresis-CD

RCT/Apheresis/CD /Induction

A randomised, double-blind, sham-controlled study of granulocyte/monocyte apheresis for moderate to severe Crohn's disease

Multicenter, randomized, double-blind placebo controlled. Patients with active CD with CDAI 220-450 were randomized to GMA (granylocyte/monocyte apheresis) or sham procedure. Ten apheresis sessions were scheduled over a 9-week period.

Primary endpoint: Clinical remission (CDAI ≤ 150) at week 12 without the use of prohibited drugs

Results: N=235

- Clinical remission was achieved by 17.8%GMA vs 19.2% sham control group, p=0.858
- Clinical response 28% GMA vs 26.9% sham control, p=1

Conclusion:
GMA was well tolerated, but this study did not demonstrate its effectiveness over a sham procedure in inducing clinical remission or response in patients with moderate to severe CD.

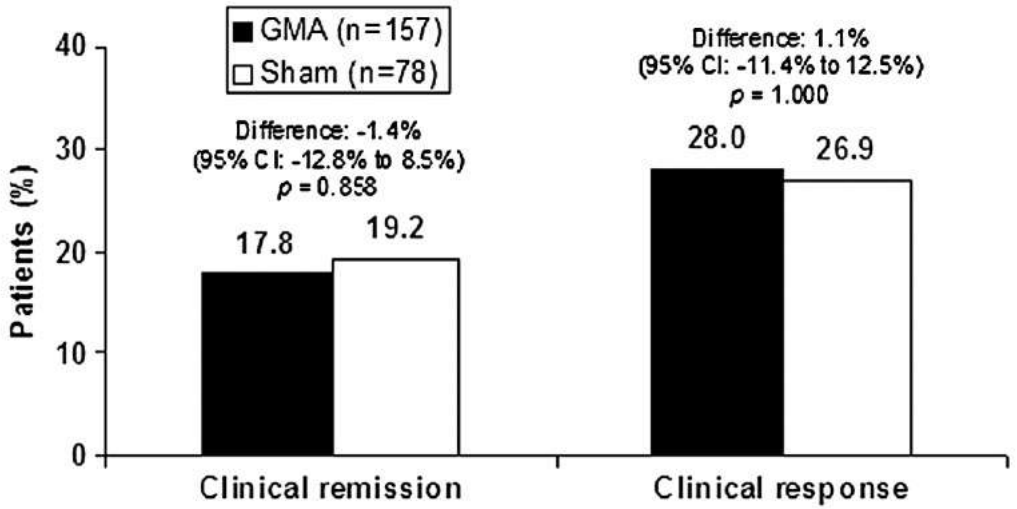

Figure 2 Clinical outcomes in patients treated with granulocyte/monocyte apheresis (GMA) and sham-treated patients.

Sands BE et al. Inflamm Bowel Dis. 2012